FORM D PRI ZESSING SE VIII SE VIII

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR

NIFORM LIMITED OFFERING EXEMPTION



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Date Rec	eived
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Name of Offering (☐ check if this SERIES A FINANCING	is an amendment and name has changed, and	l indicate change	.)	1331905	
Filing Under (Check box(es) that apply Type of Filing: New Filing	y): ☑ Rule 504 ☐ Rule 505 ☐ Ru ☐ Amendment	ile 506 🔲 S	Section 4(6)	☑ ULOE	
	A. BASIC IDENTIFICATIO	N DATA			
1. Enter the information requested about	out the issuer				
Name of Issuer (☐ Check if this is a PROCURE TREATMENT CENTERS	in amendment and name has changed, and inc., INC.	dicate change.)			
Address of Executive Offices (Number and Street, City, State, Zip Code) 708 THIRD AVENUE, 5 TH FLOOR, NEW YORK, NY 10017 Telephone Number (Including Area) (212) 209-3844					
Address of Principal Business Operati (if different from Executive Offices)	ons (Number and Street, City, Sta	ate, Zip Code)	Telephone 1	Number (Including Area Code)	
Brief Description of Business					
PROCURE WAS FORMED TO BUIL	D AND RUN PROTON THERAPY CENTE	RS.	V	/ jul 0 1 2005 1 Thomson	
Type of Business Organization				FINANCIA	
☑ corporation ☐ business trust	☐ limited partnership, already formed☐ limited partnership, to be formed		other (please s		
Actual or Estimated Date of Incorpora Jurisdiction of Incorporation or Organ	tion or Organization: ization: (Enter two-letter U.S. Postal Service CN for Canada; FN for other foreign	0 5 abbreviation for	⊠ Act	tual	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter □ Director ☐ General and/or Managing Partner FORD, HADLEY Full Name (Last name first, if individual) 460 East 79th Street, 17 A/B, New York, NY 10021 **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☑ Beneficial Owner □ Director ☐ General and/or Managing Partner CAMERON, JOHN DR. Full Name (Last name first, if individual) 2102 Grovesnor Place, Bloomington, IN 47401 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ■ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner CHANDLER, CHRIS Full Name (Last name first, if individual) 6003 Willow Oak Court, Prospect, KY 40059 **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☐ Executive Officer Director DI D ☐ General and/or Managing Partner TAXIN, GREGORY Full Name (Last name first, if individual) 2901 Pine Street, San Francisco, CA 94115 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Director ☐ General and/or Managing Partner CAMERON, KEVIN Full Name (Last name first, if individual) 1028 Lombard, San Francisco, CA 94109 (Number and Street, City, State, Zip Code) **Business or Residence Address** Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner ☐ Executive Officer ☐ General and/or □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

				B. INF	ORMATIC	ON ABOU	r offeri	NG				
1. Has the is	suer sold, o	or does the i	ssuer inten	d to sell, to	non accredi	ted investo	rs in this of	fering?				√o ⊒
	,				Appendix,			•	••••••••			•
2 What is th	minimu	. i=1/25tm20					-		ė.		£ 25.000	
2. What is the minimum investment that will be accepted from any individual?							\$ <u>25,000</u> Yes 1	No				
3. Does the offering permit joint ownership of a single unit?								NO 3 1				
4. Enter the remuneration agent of a bropersons to be Full Name (L	for solicitate oker or deal listed are a	ation of pur ler registere associated p	chasers in c d with the S ersons of si	connection SEC and/or	with sales of with a state	f securities or states, l	in the offer	ing. If a pe e of the bro	rson to be l ker or deale	isted is an r. If more	associated than five	person or
N	/A								·			
Business or F		Address (Nu	mber and S	street, City,	State, Zip (Code)		· · · · · · · · · · · · · · · · · · ·	• •			
N	/A				•							
Name of Ass		ker or Deal	er				····	-				
			· ·									
States in Wh	/A ich Person l	Listed Has	Solicited or	Intends to	Solicit Purc	hasers					·	·-·
												All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast marie m	ist, ii iiidiv	iduai)									
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (Code)				· ·		
Name of Ass	ociated Bro	ker or Deal	er						•			,
States in Whi	ich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						
-				ates)		•••••						All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[[1]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indiv	idual)									
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (Code)						
			•					**				
Name of Asse	ociated Bro	ker or Deal	ег									
States in Whi								*		<u></u>	<u></u>	
•												All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE]	[NV]	[NH] [TN]	[NJ] ITXI	[NM] IUTI	[NY] IVTI	[NC] [VA]	[ND] [WA]	[OH]	[OK]	[OR] (WY)	[PA] [PR]
11/211	1.36.1	10171	111111	1171	11/11	1 4 1 1	1 4 75 1	1 44 54 1	1 YY V I	1 44 1 I	1 77 1 1	ILV

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

Type of Security	Aggregate Offering Price	
Debt	\$	\$
Equity	\$_450,000	\$ <u>0</u>
□ Common ☑ Preferred		
Convertible Securities (including warrants)	\$ <u>450,000</u>	\$ <u>0</u>
Partnership Interests	\$ <u>0</u>	\$ <u>0</u>
Other (Specify)	\$ <u>0</u>	\$ 0
Total	\$ <u>450,000</u>	\$ <u>0</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	0	\$_0
Non-accredited Investors	_0	\$_0
Total (for filings under Rule 504 only)	0	\$ 0
Answer also in Appendix, Column 4, if filing under ULOE.		\$ <u></u>
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of Security	Dollar Amoun Sold
Rule 505		\$ <u>0</u>
Regulation A		\$ <u>0</u>
Rule 504		\$ <u>0</u>
Total		\$ <u>0</u>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	*** *	
Transfer Agent's Fees		
Printing and Engraving Costs		 \$
Legal Fees	•••••	⊠ \$ <u>25,000</u>
Accounting Fees		□ \$
Engineering Fees		<u> </u>
Sales Commissions (specify finders' fees separately)		S
Other Expenses (identify)		\$
Total	***************************************	⊠ \$ <u>25,000</u>

	e, number of investors, expenses and use	OF P	ROCEEDS_	
l and total expenses furnished in respons	ate offering price given in response to Part C - Question se to Part C - Question 4.a. This difference is the			\$ <u>425,000</u>
used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal forth in response to Part C - Question 4.b above.			
			Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees			\$	□ \$
Purchase of real estate			\$	□ \$
Purchase, rental or leasing and installat	ion of machinery and equipment			□ \$
Construction or leasing of plant buildin	gs and facilities		\$	□ \$
offering that may be used in exchange t		_	•	-
				□ \$
• •				□ \$
				■ \$ <u>425,000</u>
•		u	3	S
		_		
· -				□ \$ <u>425,000</u>
Coldini Totals			Ψ	Ø ₹25,000
Total Payments Listed (Column totals a	ıdded)		154 \$ 4	25,000
	,			
	D. FEDERAL SIGNATURE		<u> </u>	
			<u> </u>	
following signature constitutes an undertaki	aned by the undersigned duly authorized person. If this no ing by the issuer to furnish to the U.S. Securities and Exch issuer to any non-accredited investor pursuant to paragra	ange (Commission, up	on written request
ssuer (Print or Type)	Signature, MATA		Date	1 -
PROCURE TREATMENT CENTERS, INC.			6/2	7/05
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
HADLEY FORD	CHIEF EXECUTIVE OFFICER			

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)